Best Available Copy

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE O			OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			19				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBE	ER EXTRA	E	BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			minus 20=		*	Ø		X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS) minus 3 =		*	0		X42=		OR	X84=	
MU	LTIPLE DEPEN	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	140
CLAIMS AS AMENDED - PART II								OM41: -	-11717	-	OTHER	
		(Column 1)		(Colu		(Column 3)	-	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* NTATION OF M	Minus	***	T CL AIM	=		X42=		OR	X84=	
	FIRST PRESE	INTATION OF M	OLTIPLE DE	PENDEN	CLANV			+140=.		OR	+280=	
								TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	Î					
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGI NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	\int	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	T OL ANA			X42=		OR	X84=	
ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						」	+140=		OR	+280=	
								TOTAL DDIT. FEE			TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER TOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	* ENTATION OF M	Minus	***	JT CL AINA	=	$\ \ $	X42=		OR	X84=	
-	LIUSI PUESI		OLITE DE	. LINDEN	TI OLAIM		4	+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previous Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR TOTAL ADDIT. FEE												
**	*If the "Highest N	umber Previously I mber Previously Pa	Paid For" IN Th	IS SPACE	E is less tha	an 3, enter "3."			propriate bo	x in co		
1												į,